SUBJECT: Referral Process, Emergency Referrals

Date: 12/5/12, 1/22/13

If we do not provide the services the participants need, Coordinated Intake and Home Visitors will refer participants to other agencies, by referring to resource guide. Services requested can include any of the following:

- Day Care
- Head Start
- Kindergarten
- Education/Training
- Individual Counseling
- Family Counseling
- Parent/Interaction/Support Groups
- Legal Services
- Utilities Rental Assistance
- Food Pantries
- Shelter
- Other social services

Emergency Referrals

- If participant is in need of food, clothes, shelter, we will refer participant to community resources, i.e. 911 and etc.
- CSD will have an annually updated resource guide that will be given to participants on a case by case basis.
- CSD will keep an updated copy of the resource list
- As emergencies rise within our families we will refer and link our families to resources, to assess their needs.
- If suicidal, assess them, immediately refer to Cicero Family Service, call 911, Cares Hotline and SASS.

The Resource Guide can be obtained by contacting the Community Systems Developer (CSD). A list of resources has also been attached.

When a family is in need of service, the referral must be documented in ETO.

SUBJECT: Centralized Intake

Date: 11/28/12, 1/22/13

- The initial contact will be made by the MIECHV coordinated intake staff within the 24 hours upon receiving referral.
- Coordinated Intake schedules first home visit to collect all necessary data using the CIAT tool.
- Once participant(s) information is gathered coordinated intake enters data in ETO software.
- The participant is then referred to one of our two partnering agencies: Family Focus or The Children's Center.
- The second contact is made by home visitor within a week upon receiving the referral, and must schedule a home visit within a two week period.
- Home visitor will screen the child and family using tools such as the ASQ-3, 4P's model, while educating using the PAT research based model.

SUBJECT: Consents and Releases

Date: 11/28/12

- Coordinated intake obtains a photo release, a consent to participate in program, and a MIECHV ETO informed consent form at the time of intake.
- All three consents/releases will be signed by participant at time of intake.

SUBJECT: Release and Exchange of Information

Date: 12/5/12

- All participant information is treated as confidential
- release information only to MIECHV team
- Participant can revoke release and exchange of information in writing for the MIECHV team to document.

SUBJECT: Documentation of Income

Date: 11/28/12, 1/22/13

Financial Verification will be done by virtue of the CIAT tool, through Coordinated Intake and obtain signature from participant at that time.

SUBJECT: Concerns and Complaints

Date: 11/28/12, 1/22/13

Concerns and complaints will be tracked through a Concern and Complaint Log. The Log will be distributed to everyone on the team and kept and updated by CSD. Anyone who has a complaint will add to the log and email CSD. CSD will try to resolve the complaint. Next team meeting we will address concerns or celebrate comments.

SUBJECT: Aging Out

Date: 11/28/12, 1/22/13

- Once the Child is 30 months old, the home visitor should begin talking to the parents about the transition process.
- Home visits will be reduced to once a month once the child reached 30 months until the time the child is in pre-k or until 48 months, which ever comes first.
- Parents should be informed about different options for their children age 3-5, whether it is a daycare, pre-k head start, or home based program.
- Home visitors should refer and link family to daycare, pre-k head start, or home based program.
- Coordinated intake will provide family with a termination letter a month before exiting the child from our program.

SUBJECT: IFSP Development & Review Process

Date: 11/28/12, 1/22/13

- Families are screened on both strengths and areas that are in need of development.
- If assessment is recommended before the age of 3, the home visitor would refer and link to Child and Family Connections # 7 (708) 449-0625. If the CFC Assessment Team recommends an Individual Family Service Claim (IFSP), this plan is developed with the parents.
- A signature is required on the original IFSP that indicates the parent agrees with the IFSP and will be obtained by the home visitor.
- The IFSP is revisited every six months
- The IFSP may be changed and adjusted with participant input and approval in order to reflect any updates in ASQ screening results or other family circumstances.

SUBJECT: ASQ's Referral Process and ASQ Screening Process

Date: 11/28/12, 1/22/13

ASQ Screening Process

- Participant children are screened via the Ages and Stages Developmental Tool
- Participant children are screened within 60 days of beginning the program
- Screening results are shared with parent/s within 10 business days of screening completion
- All screening results are shared with the parent/s in person as well as in a written format
- When a home visit is not scheduled with the family, within the 10-day resultsharing period, staff will insure that written screening results are mailed to the home with an appointment to discuss the results in person during the next scheduled home visit.

Screening Timeline as Follows:

- Children will have an initial screening, according to their age, within 60 days after intake.
- Children are screened approximately every 4 months.
- Children who's scores reflect the need for further assessment will be screened at closer intervals (approximately every two months) and will be referred to early intervention with parent consent.
- Children will continue to be screened following the appropriate interval schedule until they exit out of the program (every four months w/typical development, every two months w/further assessment needed)
- The final screening in this series will not exceed age thirty-six (36) months. At this time children will be transitioned out of the program and referred to early childhood education centers that will support the child's healthy development.

ASO Referral Process

- When the home visiting program obtains a waiting list, central intake will administer ASQ. We will keep a copy for our records and refer and link to Child Family Connections # 7 (708) 449-0625. as needed.
- If the home visiting program has no waiting list, ASQ will be completed by the home visitor within the first 60 days and entered into ETO. Thereafter ASQ will be administered according to the ASQ timetable.

SUBJECT: Marketing

Date: 12/5/12, 1/22/13

- All marketing will contain all agency, community, CYTF and government logos.
- All marketing will consist of the color scheme: Purple, Orange, Black
- Language on all marketing material must be inviting to families, be in both English and Spanish and must meet state requirements. We are committed to marketing which addresses Family support services plea and is engaging to the families in our community.
- Design of marketing will be formulated by CSD, and then disseminated to Quality Assurance team for first review.
- Any marketing material will then be added to the agenda to be reviewed by MIECHV team, which will be the second review.
- Third review will be conducted by the CYTF Early Childhood Committee.
- It will then be finalized by the MIECHV team.

SUBJECT: Authorization Form/ Exit Interview

Date: 3/11/2013

- An Exit Interview will be conducted when a family departs from the program.
- When a family drops the program, the Home Visitor will notify supervisor.
- Supervisor will generate a list of families that have dropped the program and will notify Coordinated Intake.
- Coordinated Intake will contact the family(ies) to conduct the Exit Interview.
- If upon conducting the Exit Interview, Coordinated Intake receives a comment or concern it will be given to Community Systems Developer to add to Comment/Concern Log.
- Exit Interview will be added to the Families File.

SUBJECT: Termination

Date: 9/4/2013

- A family will be moved to waiting list status upon failure to communicate after three attempted outreaches by Home Visiting Staff.
- Coordinated Intake will then communicate by phone call, mailing, and surprise home visit.
- If failure to reciprocate communication after 6 months occurs, coordinated intake will then bring case to MIECHV committee to unanimously agree to discontinue services.
- If the family decides to continue services, Coordinated Intake will implement a risk assessment. Based on the outcome, the family will either receive priority for services or, continue to be on waiting list until a space becomes available.